THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) The Board of Radiation and Isotope Technology, a constituent unit of the Department of Atomic Energy has developed "Sterilized Dai Kits". The kits found wide acceptance in the Northern States. Attempts have been made to popularise the use of such kits in the Southern States of the country.

(b) M/s Tribhuvandas Foundation, Anand, Gujarat, a voluntary NGO has acknowledged the benefits of such kits in the rural areas, as child birth procedures are much more hygienically conducted with these kits. They have now taken up the preparation and distribution of such kits in the rural areas of the State. Similarly, M/s Anna Purna Mahila, an NGO in Maharashtra State has also initiated action in this direction.

(c) and (d) The Department of Atomic Energy has been helping in radiation sterilization of the kits before distribution for the past five years, during which about 2 million kits have been brought by manufacturers for sterilization for supply to Government for further distribution. Under the RCH programme also, funds have been released to the States for procurement of disposable delivery kits sterilized with Gamma Rays irradiation.

Financial aid to private hospitals

1895. SHRI BACHANI LEKHRAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have instructed the hospitals to follow certain rules at the time of issuing financial aid to them;

(b) if so, the details thereof;

(c) whether Government have also laid down a condition of providing free treatment to 40 per cent poor people;

(d) if so, the names of the agency entrusted with conducting an enquiry into the non-compliance of the terms and conditions set in this regard; and

(e) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (e) 'Health' is a State subject under

the Constitution of India. Hence, normally the medical infrastructure including hospitals, except for certain hospitals funded and controlled by the Central Government, come within the purview of the respective State Government. However, Central Government provides grants-in-aid to the States for upgradation and strengthening of emergency services in the State Hospitals located on National Highways. While issuing sanction, terms are set out to ensure that the funds are utilised for purpose for which the same have been sanctioned. Grants-in-aid are also given under National Cancer Control Programme to the Government and on the recommendation of State Government to Non-Government Organisations (NGOs), setting up of Cobalt Therapy Unit. The terms and conditions for this grant-in-aid to the Non-Government Organizations *inter-alia* include free services to be provided to poor and indigent patients who will account for not less than 50% of the patients (40% of the OPD and 10% of the Indoor patients). State Governments are requested to monitor the compliance of these provisions.

Increase in Radio-diagnostic Tests fees

1896. PROF. RAM DEO BHANDARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that All India Institute of Medical Sciences, New Delhi is providing expertise trreatment to poor patients drawn from far-flung areas of the country particularly from Bihar;

(b) whether it is also a fact that the AIIMS raised charges for radio-diagnostic tests exorbitantly depiriving the poor patients from availing the treatment from AIIMS;

(c) if so, the scales of the charges increased by AIIMS *vis-a-vis* other Central Government hospitals in the capital;

(d) whether any directive has been issued by the Ministry for reviving such a huge charges; and

(e) if so, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) and (b) All India Institute of Medical Sciences has been set up as an Institute of National Importance under an Act of Parliament. The charges of a few of Radio-diagnostic investigations have been increased due to increase in the cost of consumables and drastic upsurge in the patient load.